

PATENT APPLICATION FEE DETERMINATION FORM

09589953

| | | | |
|-----------------------|---|-------|---|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total claims | 20 | Minus | 20 |
| Independent claims | 2 | Minus | 3 |

| | | | |
|-----------------------|---|-------|---|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total claims | 2 | Minus | 3 |
| Independent claims | 1 | Minus | 1 |

| | | | |
|-----------------------|---|-------|---|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total claims | 1 | Minus | 1 |
| Independent claims | 0 | Minus | 0 |

CLAIMS AS AMENDED IN THIS PRESENTATION

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | FEE RATE | | TOTAL ADDITIONAL FEE |
|-----------------------|---|-------|---|----------|-------------------|----------------------------|
| | | | | RATE | ADDITIONAL FEE | |
| Total claims | 20 | Minus | 20 | \$2 | \$2 | |
| Independent claims | 2 | Minus | 3 | \$2 | \$2 | |

FIRST PRESENTATION OF KEEPEE DEPENDENT CLAIM

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | FEE RATE | | TOTAL ADDITIONAL FEE |
|-----------------------|---|-------|---|----------|-------------------|----------------------------|
| | | | | RATE | ADDITIONAL FEE | |
| Total claims | 2 | Minus | 3 | \$2 | \$2 | |
| Independent claims | 1 | Minus | 1 | \$2 | \$2 | |

FIRST PRESENTATION OF KEEPEE DEPENDENT CLAIM

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | FEE RATE | | TOTAL ADDITIONAL FEE |
|-----------------------|---|-------|---|----------|-------------------|----------------------------|
| | | | | RATE | ADDITIONAL FEE | |
| Total claims | 1 | Minus | 1 | \$2 | \$2 | |
| Independent claims | 0 | Minus | 0 | \$2 | \$2 | |

FIRST PRESENTATION OF KEEPEE DEPENDENT CLAIM

| AMENDMENT D | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | FEE RATE | | TOTAL ADDITIONAL FEE |
|-----------------------|---|-------|---|----------|-------------------|----------------------------|
| | | | | RATE | ADDITIONAL FEE | |
| Total claims | 0 | Minus | 0 | \$2 | \$2 | |
| Independent claims | 0 | Minus | 0 | \$2 | \$2 | |

FIRST PRESENTATION OF KEEPEE DEPENDENT CLAIM

If the claim is dependent on another claim, enter the highest number previously paid for that claim.

If the claim is dependent on another claim, enter the highest number previously paid for that claim.

If the claim is dependent on another claim, enter the highest number previously paid for that claim.

BEST AVAILABLE COPY